

# Combined Declaration For Patent Application and Power of Attorney

ATTORNEY DOCKET  
80099WFN

As below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## MANAGEMENT OF PHYSIOLOGICAL AND PSYCHOLOGICAL STATE OF AN INDIVIDUAL USING IMAGES-OVERALL SYSTEM

The specification of which (check only one item below):

- ☐ is attached hereto.
- ☒ was filed as United States Application Serial No. 09/430,580 on October 29, 1999 and was amended on (if applicable).
- ☐ was filed as PCT international application Number on and was amended under PCT Article 19 on (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign applications(s) for patent or inventor's certificate or any PCT international application(s) designating a least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

### PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate PCT)	APPLICATION NUMBER	DATE OF FILING (day month year)	PRIORITY CLAIMED UNDER 35 USC §119	
			YES	NO
			YES	NO
			YES	NO

I hereby claim the benefit under Title 35, United States Code, 119 §(e) of any United States provisional application(s) listed below:

### PRIOR PROVISIONAL APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §119 (e):

PROVISIONAL APPLICATION NUMBER	FILING DATE

I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

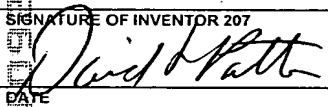
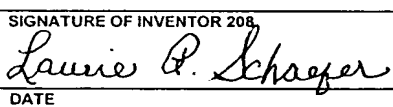
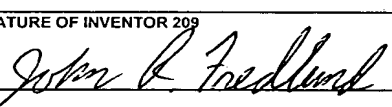
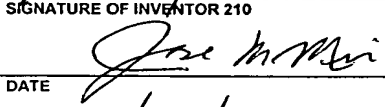
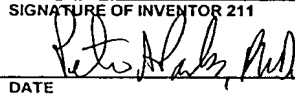
### PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S FOR BENEFIT UNDER 35USC§120:

U.S. APPLICATIONS			STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE		PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			

Combined Declaration For Patent Application and Power of Attorney (Continued)				ATTORNEY DOCKET 80099WFN
<b>POWER OF ATTORNEY:</b> As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith ( <i>List name and registration number</i> )				
<b>William F. Noval, Registration No. 22,049</b> <b>Thomas H. Close, Registration No. 27,428</b> <b>J. Lanny Tucker, Registration No. 27,678</b> <b>Sarah Meeks Roberts, Registration No. 33,447</b> <b>Milton S. Sales, Registration No. 24,516</b>				
Send Correspondence to:  Thomas H. Close Eastman Kodak Company Patent Legal Staff Rochester, NY 14650-2201				Direct Telephone Calls to: (name and telephone number)  William F. Noval (716) 477-5272 FAX: (716) 477-4646
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	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	CITY 343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME Horwitz	FIRST GIVEN NAME Cecelia	SECOND GIVEN NAME M.
	RESIDENCE & CITIZENSHIP	CITY Penfield	STATE OR FOREIGN COUNTRY New York 14526 USA	COUNTRY OF CITIZENSHIP USA
	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	CITY 343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME Miller	FIRST GIVEN NAME Paige	SECOND GIVEN NAME
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	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	CITY 343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
2 0 4	FULL NAME OF INVENTOR	FAMILY NAME Blazey	FIRST GIVEN NAME Richard	SECOND GIVEN NAME N.
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2 0 5	FULL NAME OF INVENTOR	FAMILY NAME Fedorovskaya	FIRST GIVEN NAME Elena	SECOND GIVEN NAME A.
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	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	CITY 343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
2 0 6	FULL NAME OF INVENTOR	FAMILY NAME Surve	FIRST GIVEN NAME Swatee	SECOND GIVEN NAME N.
	RESIDENCE & CITIZENSHIP	CITY Rochester	STATE OR FOREIGN COUNTRY New York 14620 USA	COUNTRY OF CITIZENSHIP USA
	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	CITY 343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.				
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNATURE OF INVENTOR 203
<i>Girish Prabhu</i>		<i>Cecelia M Horwitz</i>		<i>Paige Miller</i>
DATE <i>01/05/2000</i>		DATE <i>01/14/2000</i>		DATE <i>01-06-00</i>
SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205		SIGNATURE OF INVENTOR 206
<i>[Signature]</i>		<i>Fedorovskaya</i>		<i>Swatee Surve</i>
DATE <i>01-12-00</i>		DATE <i>01-05-00</i>		DATE <i>01-07-00</i>

Combined Declaration For Patent Application and Power of Attorney (Continued)				ATTORNEY DOCKET 80099WFN
207	FULL NAME OF INVENTOR	FAMILY NAME Patton	FIRST GIVEN NAME David	SECOND GIVEN NAME L.
	RESIDENCE & CITIZENSHIP	CITY Webster	STATE OR FOREIGN COUNTRY New York 14580 USA	COUNTRY OF CITIZENSHIP USA
	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	CITY 343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
208	FULL NAME OF INVENTOR	FAMILY NAME Schaefer	FIRST GIVEN NAME Laurie	SECOND GIVEN NAME
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	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	CITY 343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
209	FULL NAME OF INVENTOR	FAMILY NAME Fredlund	FIRST GIVEN NAME John	SECOND GIVEN NAME R.
	RESIDENCE & CITIZENSHIP	CITY Rochester	STATE OR FOREIGN COUNTRY New York 14626 USA	COUNTRY OF CITIZENSHIP USA
	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	CITY 343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
210	FULL NAME OF INVENTOR	FAMILY NAME Mir	FIRST GIVEN NAME Jose	SECOND GIVEN NAME V.
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	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	CITY 343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
211	FULL NAME OF INVENTOR	FAMILY NAME Parks	FIRST GIVEN NAME Peter	SECOND GIVEN NAME A.
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	BUSINESS ADDRESS	BUSINESS ADDRESS Synergy Systems Consulting, Inc.	CITY 337 S.W. Elmwood Avenue, Topeka	STATE & ZIP CODE (COUNTRY) Kansas 66606-1233
212	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 207 	SIGNATURE OF INVENTOR 208 	SIGNATURE OF INVENTOR 209 
DATE Jan 7, 2000	DATE 01-06-2000	DATE 6-JAN-00
SIGNATURE OF INVENTOR 210 	SIGNATURE OF INVENTOR 211 	SIGNATURE OF INVENTOR 212
DATE 1/13/2000	DATE 12-29-99	DATE